

Work Order ID 99599

99599

Page 1

April-11-13 2:13:13 PM

Item ID: D3015-5 Accept *N900040100* Setup Start *NS1*
 Revision ID: Stop *NS2*
 Item Name: SS Nylock Nut 7/16
 Start Date: 4/11/13 Start Qty: 25.00
 Required Date: 4/11/13 Req'd Qty: 25.00
 Reference:

Approvals: Process Plan: *PP* Date: *13-04-11* Tooling: Date: Run Start *NR1*
 QC: Date: SPC (Y/N): Date: Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D3015	<i>Rev 4</i>								
100	PURCHASING	0.00							
100									
Purchasing	Memo	0.00							
Purchasing	Issue P/O: <i>19593</i>								
	Description: SS locknut with nylon insert								
	Possible Supplier: Acklands P/N: PFS LNNC716S1								
	Material release note required								
110	Receive & Inspect for Damage & Mat'l Certs	0.00							
110									
Packaging	Memo	0.00							
Packaging	Ensure Material! Release Note is attached								
120	QC6- Inspect dimensions to drawing	0.00							
120									
QC	Memo	0.00							
Quality Control									

CA 13/04/16 100

13/04/11 (100)

13614

100

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

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Page 2

April-11-13 2:13:13 PM

Item ID: D3015-5 Accept *N900040100* Setup Start *NS1*
Revision ID: Stop *NS2*
Item Name: SS Nylock Nut 7/16
Start Date: 4/11/13 Start Qty: 25.00 *25* Cust Item ID:
Required Date: 4/11/13 Req'd Qty: 25.00 *25* Customer:
Reference:

Approvals: Process Plan: Date: Tooling: Date: Run Start *NR1*
QC: Date: SPC (Y/N): Date: / Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	Identify as per dwg & Stock Location	0.00							
130									
Packaging	Memo	0.00							
Packaging									
140	QC21- Final Inspection - Work Order Release	0.00							
140									
QC	Memo	0.00							
Quality Control									

100X
SP
13-6-14
13/6/17
MF
13-6-14

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

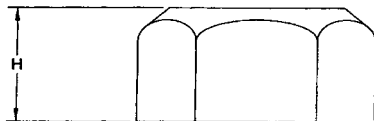
Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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SPECIFICATION CONTROL DRAWING



D3015-X LOCKNUT

PART NUMBER	SIZE	HEIGHT H	POSSIBLE SUPPLIER
D3015-1	1/4-20 UNC	0.31	ACKLANDS, P/N PFSLNNC14S1
D3015-3	5/16-18 UNC	0.34	ACKLANDS, P/N PFSLNNC516S1
D3015-5	7/16-14 UNC	0.46	ACKLANDS, P/N PFSLNNC716S1
D3015-7	M5	0.19	ACKLANDS, P/N FLMN021-005-0000

△

NOTES:

- 1) MATERIAL: SS LOCKNUT WITH NYLON INSERT
- 2) FINISH: N/A
- 3) TOLERANCES: ALL DIMENSIONS SHOWN AS REFERENCE
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: N/A

C	REFORMAT DWG. -7 P/N NOW FLMN021-005-0000 WAS LNNM5S1 (ZN B8-1), PAR 09-020	CP	09.07.08
B	ADD D3015-7	KJ	03.07.15
A	NEW ISSUE	DS	01.05.03
REV.	DESCRIPTION	BY	DATE
DESIGN			
DRAWN			
CHECKED			
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	09.07.08		

DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWING NO. D3015	REV. C SHEET 1 OF 1
TITLE LOCKNUT	SCALE NTS
COPYRIGHT © 2001 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR DISSEMINATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD	

RELEASED
09/10/15

99599
SLB-DH-11

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

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FAULT CATEGORY

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		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID **PO19593**

Purchase Order Date 4/16/13

PO Print Date 4/16/13

Page Number 1 of 1

Order From :

VC-ACK001

ACKLANDS - GRAINGER INC.
P.O. BOX 2970
WINNIPEG, MB R3C 4B5
CA

Contact Name

Vendor Phone

613 632 2739

Vendor Fax

613 632 5386

Vendor Account Nbr

Buyer

Chantal Lavoie

Requisition Nbr

Tax Resale Nbr

10127-2607

Terms

Net 30

Currency

CAD

FOB

Destination-Collect

Ship To :

DART AEROSPACE LTD 1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

FAKED
6/13/11

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	PFS-LNNC7/16S1	SS Nylock Nut 7/16	4/19/13 Yes	100.00 Each	Yours ppd	\$0.6018	\$60.18
2	PFS-FW14S1	WASHER	4/19/13 Yes	500.00 Each	Yours ppd	\$0.0593	\$29.65

Special Inst: AS PER DWG D3015 REV. C
B99599

Special Inst: AS PER DWG D2529 REV. E
B99918

PO Total:

\$89.83

**CERTIFICATE OF CONFORMITY
REQ'D UPON DELIVERY**

Change Nbr: 1

Change Date: 4/16/13

No substitution or deviation without
consent.

Certificate of Conformity or Material
Certification required **YES** NO

ACKLANDS - GRAINGER INC.
765 CAMERON ST.
HAWKESBURY ON K6A 2B7
(613) 632-2739

REMIT TO
ENVOYER À

ACKLANDS - GRAINGER INC.
PO BOX 2970

WINNIPEG MB R3C 4B5

DART AEROSPACE LTD
1270 ABERDEEN ST
HAWKESBURY **ON**
K6A 1K7

**PACKING SLIP ONLY
INVOICE TO FOLLOW**

PACKING SLIP#
1417 0426703

PAGE
PAGE NO
1 of 1

B
I
L
L
T
O

DART AEROSPACE LTD
1270 ABERDEEN ST
HAWKESBURY ON
K6A 1K7

DU CLIENT CUST. NO.	NO DE REFERENCE DU CLIENT CUST. REF. NO.
172628	19593
1726280	

NO. DE LICENSE PROVINCIALE P.S.T. LIC. NO.

NO. DU CONTRA

EXP. DIRECT

DATE DE LA COMMANDE
ORDER DATEDATE DE LA FACTURE
INVOICE DATE

DEUR
SPERSON

TERMES TERMS

185 *** NET 30 ***

NO. DE VERSEMENTS NO. OF PMTS.	0
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M.E.P.
M.B.P.
0

DATE DU PREMIER VERSEMENT FIRST PAYMENT DATE	
---	--

00/00/0000 13:27

APP. DE CREDIT	
CREDIT AUTH	

S'APPLIQUE AU NO.DE FACTURE
APPLY TO INVOICE NO.

RC/
B.O./SUB.

COPIES	
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T.P.S/G.S.T.	
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[illegible]

HST# 88970-1272/TVQ# 1019602903

SOUS TOTAL / SUB TOTAL

97.20

EDITEUR SHIP VIA
CUSTOMER PICK UP

FACT DROPPED
SHIP INV

EXPERIMENT COMPLETE

PORT PAYE
PPD FREIGHT

DATE DE LIVRAISON REQUISE
REQUESTED DELIVERY

CONNAISSEMENT
BILL OF LADING

CODE DE COM. DIF. B.O. CODE
B - B.O. COMMANDE DIF.
C - ANNULÉ ET CANCEL

9275
9305

TPS/T.VM
GSTA.SY.

12.64

0.00

DATE	DESCRIPTION	AMOUNT PAID	BALANCE
2	PAYROLL	100.00	100.00
*	TOTAL	100.00	100.00

RECU
PAR
RECEIVED
BY

109.84

MONTANT TOTAL TOTAL AMOUNT

FORM 7000

**COPIE DU CLIENT
CUSTOMER COPY**